0	PE		, ,	TRANSMITTAL	Donal & L. S.	14.	
JUL	<i>(4000 tu)</i>	••	or]	Commissioner ( P.O. Box 1450 Alexandria, Vir Fax (571)-273-2885	for Patents rginia 22313-1450	<b>9</b>	
INSTRUCTIONS to the format of appropriate. All further of indicated unless corrected maintenance fee notification	rm should be used for tran PARO Defice including the below or directed otherwise is.	smitting the ISSU Patent, advance of in Block 1, by (a	JE FEE and Proders and notifical specifying a	UBLICATION FEE (if re- cation of maintenance fees new correspondence addre	quired). Blocks I through 5 s will be mailed to the curren ss; and/or (b) indicating a sep	should be completed where it correspondence address as parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Fee(s) Transmittal. 7	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
FITZPATRICK CELLA HARPER & SCINTO 30 ROCKEFELLER PLAZA NEW YORK, NY 10112				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
07/25/2006 FFANAIA3 00000066 10784972				Frank	A. DeLucia	(Depositor's name)	
01 FC:1501 1400.00 OP 02 FC:1504 300.00 OP 03 FC:8001 15.00 OP					ign Shu	(Signature)	
				July	18, 2006	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVI		NVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/784,972	10/784,972 02/25/2004 Ornan A. Ge			ierstel	02495.000002.1	8993	
TITLE OF INVENTION: O	PTICAL NETWORK CON	NECTION TEST A	APPARATUS A	AND METHODS	_	, 	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	07/18/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
LEUNG, CH	2613		398-005000				
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
(A) NAME OF ASSIGN	an assignee is identified be 137 CFR 3.11. Completion EE		data will appea T a substitute fo (B) RESIDEN	r on the patent. If an assign filing an assignment. CE: (CITY and STATE OR	gnee is identified below, the a	document has been filed for	
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Please check the appropriate	assignee category or catego	ries (will not be pr	inted on the pat	ent): 🔲 Individual 🙀	Corporation or other private gr	roup entity Government	
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Authorized Signature

Publication Fee (No small entity discount permitted)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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